

October 18, 2011

SOUTH
CAROLINA
DEPARTMENT
OF HEALTH &
HUMAN
SERVICES

STATE MEDICAID HIT PLAN (SMHP) VERSION 4.1 CHANGE CONTROL DOCUMENT

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A note about this document: The tables in this document identify the selected excerpts from the South Carolina State Medicaid Health Information Technology Plan (SMHP). The tables provide a brief reference to significant updates in the SMHP and therefore should be used in consultation with the complete South Carolina SMHP.

South Carolina SMHP Change Control Record

Item	Excerpt from SMHP and corresponding page #
1. Patient Volume: Out-of-State Data	<p>Response to CMS letter dated September 22, 2011, Enclosure A, Comment (1) “Page 100, Patient Volume: If the State allows out-of-state Medicaid data for patient volume calculations, then eligible professionals (EP) need to understand that the denominator and numerator would increase accordingly. Please make this clearer in the SMHP.” Page 100-101: SCDHHS allows EPs to include encounters from out-of-state Medicaid recipients when calculating patient volume. To calculate patient volume using this option, the EP would add out-of-state Medicaid encounters to in-state Medicaid encounters for the numerator, and add out-of state total patient encounters to in-state total patient encounters for the denominator. As with all other data to which EPs attest, EPs must be able to supply an auditable data source that supports their calculations.</p>
2. Patient Volume: New EP Use of Group Patient Volume as Proxy	<p>Response to CMS letter dated September 22, 2011, Enclosure A, Comment (2) “Page 103, Patient Volume: The State cannot restrict a new EP from using the group proxy patient volume calculation. As long as that EP is a Medicaid provider, and meets the requirements for participating as an EP, s/he can use the group proxy patient volume, even if s/he does not have a single encounter for that reporting period.” Page 103: An EP whose date of hire by a clinic/group falls after the 90-day period selected for the clinic/group patient volume calculation may utilize the clinic/group patient volume as a proxy for his or her own patient volume, as long as it is appropriate as a patient volume methodology calculation for the EP. For example, a newly hired EP who sees Medicaid patients may utilize the clinic’s calculated Medicaid patient volume as a proxy for his or her own. Note: a newly hired EP may only utilize clinic patient volume as a proxy if the EP meets the requirement of having practiced predominantly in an FQHC or RHC (as determined by practice activity in the previous calendar year).</p>